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CONFIRMATION NO. 8770

<b>SERIAL NUMBER</b> 10/031,949	<b>FILING OR 371(c) DATE</b> 05/01/2002 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1616	<b>ATTORNEY DOCKET NO.</b> 03715.0105
<b>APPLICANTS</b> Guy Couaraze, Les -Clayes-sous-Bois, FRANCE; <i>NWS</i> Bernard Leclerc, Igny, FRANCE; Pierre Tchoreloff, Bures-sur-Yvette, FRANCE; Patrick Sanial, Morainvilliers, FRANCE;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/FR00/02132 07/25/2000 <i>NWS</i>				
<b>** FOREIGN APPLICATIONS *****</b> FRANCE 99/09653 07/26/1999 <i>NWS</i>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>NWS</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> FRANCE	<b>SHEETS DRAWING</b>	<b>TOTAL CLAIMS</b> 13
<b>INDEPENDENT CLAIMS</b> 2				
<b>ADDRESS</b> 21839				
<b>TITLE</b> Low-dose tablets and preparation method				
<b>FILING FEE RECEIVED</b> 1300	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	